

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213508715				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: Science, Engineering, and Technology Associates Corporation</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: DE</p> </div> <div style="width: 35%;"> <p>DUE DATE: 3/31/2013</p> <p>SCC ID NO: F1503582</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>100</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	100
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COMMON	100					
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 1005 NORTH GLEBE ROAD 4TH FLOOR</p> <p style="text-align: center;">CITY/ST/ZIP: ARLINGTON, VA 22201</p>						
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: THOMAS J. BURNS TITLE: PRESIDENT ADDRESS: 1005 N. GLEBE ROAD SUITE 400 CITY/ST/ZIP/CO: ARLINGTON, VA 22201 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: THOMAS J. BURNS TITLE: PRESIDENT ADDRESS: 1005 N. GLEBE ROAD SUITE 400 CITY/ST/ZIP/CO: ARLINGTON, VA 22201	<input checked="" type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR	
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	James B. Garrison VICE PRESIDENT 1710 SAIC Drive MS T-2-4-2 McLean, VA 22102	<input checked="checked" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Lisa A. Barkan VICE PRESIDENT 1710 SAIC Drive MS T2-8-2 McLean, VA 22102	<input checked="checked" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Rafael Alonso EVP 1005 N. Glebe Road Suite 400 Arlington, VA 22201	<input checked="checked" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Robert Douglass EVP 1005 N. Glebe Road Suite 400 Arlington, VA 22201	<input checked="checked" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Frederick R. Hazard SVP 10140 Campus Point Drive Mail Stop H-4 San Diego, CA 92121	<input checked="checked" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	James L. Cantor Deputy CEO 1710 SAIC Drive McLean, VA 22102	<input checked="checked" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.					
/s/ CLEMENT VINCENT QUELLA, III SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		CLEMENT VINCENT QUELLA, III, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE		2/20/2013 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.					